

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Post Office Square, LLC

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 27-2783681

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

7 Stillo Drive
Monsey, NY 10952

Number, Street, City, State & ZIP Code

Rockland
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Post Office Square, LLC**
Name

Case number (if known)

7. Describe debtor's business A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing? *Check one:*

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?** ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District		When		Case number	
District		When		Case number	

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☐ No.
☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Larry B. Weinstein	Relationship	Principal
District	Southern District of New York	When	10/10/19
		Case number, if known	19-23827

Debtor **Post Office Square, LLC** Case number (if known) _____
Name

Debtor **Post Office Square, LLC**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Post Office Square, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **September 18, 2020**
MM / DD / YYYY

X /s/ Larry B. Weinstein
Signature of authorized representative of debtor

Title **Sole Member**

Larry B. Weinstein
Printed name

18. Signature of attorney

X /s/ Harvey S. Barr
Signature of attorney for debtor

Date **September 18, 2020**
MM / DD / YYYY

Harvey S. Barr
Printed name

Barr Legal, PLLC
Firm name

**80 Red Schoolhouse Road
Suite 110
Spring Valley, NY 10977**
Number, Street, City, State & ZIP Code

Contact phone **845-352-4080**

Email address **hbarr@barrlegal.com**

1410349A NY
Bar number and State

Fill in this information to identify the case:

Debtor name **Post Office Square, LLC**
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
Case number (if known): _____

☐ Check if this is an
amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Athenia Mason Supply, Inc 72 Mina Ave Clifton, NJ 07011			Disputed			\$14,154.83
Bellavista Construction Corp P.O. Box 978 Suffern, NY 10901			Disputed			\$7,720.00
East Coast Stucco 73 Palisades Avenue Garfield, NJ 07026			Disputed			\$40,000.00
EZ Glass and Mirrors 30 Melnick Drive Monsey, NY 10952			Disputed			\$9,834.55
Hayden Building Maintenance 169 Western Highway West Nyack, NY 10994			Disputed			\$57,407.00
HW Hardware/Doors 70 Red Schoolhouse Road Spring Valley, NY 10977			Disputed			\$5,000.00
Larry B. Weinstein 7 Stillo Drive Suffern, NY 10901						\$4,000,000.00
Pro Built East 30-40 Golf Links Road Middletown, NY 10940			Disputed			\$214,901.20

Debtor **Post Office Square, LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Rockland County Department of Finance 50 Sanatorium Road, Builing A Pomona, NY 10970			Disputed			\$289,386.81
Shragaei Electrical Corp 42 Olympia Lane Monsey, NY 10952			Disputed			\$40,000.00
Tax Receiver Ramapo Town Hall 237 Route 59 Suffern, NY 10901			Disputed			\$21,367.90
Travcon Inc 375 Kings Highway Valley Cottage, NY 10989			Disputed			\$700.00
Village of Spring Valley Tax Collector 200 N. Main Street Spring Valley, NY 10977			Disputed			\$32,931.38

Fill in this information to identify the case:

Debtor name **Post Office Square, LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Athenia Mason Supply, Inc 72 Mina Ave Clifton, NJ 07011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$14,154.83
3.2	Nonpriority creditor's name and mailing address Bellavista Construction Corp P.O. Box 978 Suffern, NY 10901 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$7,720.00
3.3	Nonpriority creditor's name and mailing address East Coast Stucco 73 Palisades Avenue Garfield, NJ 07026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$40,000.00
3.4	Nonpriority creditor's name and mailing address EZ Glass and Mirrors 30 Melnick Drive Monsey, NY 10952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$9,834.55

Debtor	Post Office Square, LLC Name _____	Case number (if known) _____
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3.5	Nonpriority creditor's name and mailing address Hayden Building Maintenance 169 Western Highway West Nyack, NY 10994 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$57,407.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address HW Hardware/Doors 70 Red Schoolhouse Road Spring Valley, NY 10977 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address Larry B. Weinstein 7 Stillo Drive Suffern, NY 10901 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,000,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address Pro Built East 30-40 Golf Links Road Middletown, NY 10940 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$214,901.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address Rockland County Department of Finance 50 Sanatorium Road, Building A Pomona, NY 10970 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$289,386.81 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address Shragaei Electrical Corp 42 Olympia Lane Monsey, NY 10952 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$40,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address Tax Receiver Ramapo Town Hall 237 Route 59 Suffern, NY 10901 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$21,367.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Post Office Square, LLC** Case number (if known) _____
Name

3.12 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$700.00**
Travcon Inc
375 Kings Highway
Valley Cottage, NY 10989
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.13 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$32,931.38**
Village of Spring Valley
Tax Collector
200 N. Main Street
Spring Valley, NY 10977
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	James Mayer, Esq P.O. Box 35 Westwood, NJ 07675	Line 3.1 <input type="checkbox"/> Not listed. Explain _____	—
4.2	Kleinman Slatzman & Bolnick PO Box 947 151 North Main Street, FL 4 New City, NY 10956	Line 3.8 <input type="checkbox"/> Not listed. Explain _____	—
4.3	Rabinowitz, Galina & Rosen 94 Willis Ave Mineola, NY 11501	Line 3.3 <input type="checkbox"/> Not listed. Explain _____	—
4.4	Rabinowitz, Galina & Rosen 94 Willis Ave Mineola, NY 11501	Line 3.10 <input type="checkbox"/> Not listed. Explain _____	—
4.5	Thomas Humbach, County Atty 11 New Hempstead Road New City, NY 10956	Line 3.9 <input type="checkbox"/> Not listed. Explain _____	—
4.6	Welby, Brady & Greenblatt 11 Martine Ave, 15th Floor White Plains, NY 10606	Line 3.5 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts	
5a. Total claims from Part 1	\$ 0.00
5b. Total claims from Part 2	\$ 4,733,403.67
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ 4,733,403.67

Debtor **Post Office Square, LLC** Case number (if known) _____
Name

ATHENIA MASON SUPPLY, INC
72 MINA AVE
CLIFTON, NJ 07011

BELLAVISTA CONSTRUCTION CORP
P.O. BOX 978
SUFFERN, NY 10901

EAST COAST STUCCO
73 PALISADES AVENUE
GARFIELD, NJ 07026

EZ GLASS AND MIRRORS
30 MELNICK DRIVE
MONSEY, NY 10952

HAYDEN BUILDING MAINTENANCE
169 WESTERN HIGHWAY
WEST NYACK, NY 10994

HW HARDWARE/DOORS
70 RED SCHOOLHOUSE ROAD
SPRING VALLEY, NY 10977

JAMES MAYER, ESQ
P.O. BOX 35
WESTWOOD, NJ 07675

KLEINMAN SLATZMAN & BOLNICK
PO BOX 947
151 NORTH MAIN STREET, FL 4
NEW CITY, NY 10956

LARRY B. WEINSTEIN
7 STILLO DRIVE
SUFFERN, NY 10901

PRO BUILT EAST
30-40 GOLF LINKS ROAD
MIDDLETOWN, NY 10940

RABINOWITZ, GALINA & ROSEN
94 WILLIS AVE
MINEOLA, NY 11501

ROCKLAND COUNTY DEPARTMENT
OF FINANCE
50 SANATORIUM ROAD, BUILDING A
POMONA, NY 10970

SHRAGAEI ELECTRICAL CORP
42 OLYMPIA LANE
MONSEY, NY 10952

TAX RECEIVER
RAMAPO TOWN HALL
237 ROUTE 59
SUFFERN, NY 10901

THOMAS HUMBACH, COUNTY ATTY
11 NEW HEMPSTEAD ROAD
NEW CITY, NY 10956

TRAVCON INC
375 KINGS HIGHWAY
VALLEY COTTAGE, NY 10989

VILLAGE OF SPRING VALLEY
TAX COLLECTER
200 N. MAIN STREET
SPRING VALLEY, NY 10977

WELBY, BRADY & GREENBLATT
11 MARTINE AVE, 15TH FLOOR
WHITE PLAINS, NY 10606